

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	<i>SM</i>	<i>JCB6N</i>	<i>7/13/01</i>
<b>RESPONSE FORMALITY REVIEW</b>	<i>AM</i>	<i>JC 58P</i>	<i>10-17-01</i>

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
3	3	3	6/10/01
4	4	4	6/10/01
5	5	5	6/10/01
6	6	6	6/10/01
7	7	7	6/10/01
8	8	8	6/10/01
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10	10	10	6/10/01
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14	14	14	6/10/01
15	15	15	6/10/01
16	16	16	6/10/01
17	N	N	
18	N	N	
19	19	19	6/10/01
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If more than 150 claims or 10 actions  
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*3/13/01*  
*7/6/01*

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Claim	Final	Original	Date
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*3/13/01*  
*7/6/01*